## STATE BOARD OF ELECTIONS STATE OF ILLINOIS

1020 South Spring Street, P.O. Box 4187 Springfield, Illinois 62708 217/782-4141 TTY: 217/782-1518

Fax: 217/782-5959

James R. Thompson Center 100 West Randolph, Suite 14-100 Chicago, Illinois 60601 312/814-6440 TTY: 312/814-6431

Fax: 312/814-6485



EXECUTIVE DIRECTOR Daniel W. White

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Robert J. Walters

January 24, 2007

U.S. ELECTION ASSISTANCE COMMISSION

Mr. Tom Wilkey Executive Director Election Assistance Commission 1225 New York Avenue, NW Suite 1100 Washington, DC 20005

Dear Tom:

Enclosed you will find amended HAVA financial reports as requested in your letter of January 10, 2007. Should you have any questions do not hesitate to contact me.

Sincerely,

Daniel W. White Executive Director

Enclosures (via UPS)

REVISED 1/2017

## FINANCIAL STATUS REPORT

(Long Form)

<del></del>		(Follow Instruction				
Federal Agency and Organizational Element     to Which Report is Submitted     By Federal Agency			entitying Number Assigne	ed	OMB Approval Page	1 .
U.S. Election Assistance Commission Title I, Section 102 (Ti		rough Calendar Ye	ear 2004)	0348-0039	1	
Recipient Orga	nization (Name and complete ad	dress, including ZIP code)				pages
Illinois State B	Board of Elections				EVISED	
1020 South S	pring Street, Springfield, II	L 62704				
Employer Identi	. Employer Identification Number 5. Recipient Account Number CFDA# 39.011		r or Identifying Number	6. Final Report  Yes No	7. Basis 🖸 Accru	ual
	Period (See instructions)		9. Period Covered by t	his Report		
•	From: (Month, Day, Year)  To: (Month, Day, Year)  To: (Month, Day, Year)  STATE DEADLINE			Year)	To: (Month, Day, Year)	)
7/1/2003 10. Transactions:		FOR SECT, 105	1/1/2004	·r-	12/31/2004	
iv. Iransadoris.			Previously Reported	This Period	III Cumulative	
a. Total outlays			0.00	12,280,500.00	12,280,500.00	
b. Refunds, r	rebates, etc.					0.00
c. Program is	ncome used in accordance with the	ne deduction alternative				0.00
d. Net outlays (Line a, less the sum of lines b and c)			0.00	12,280,500.00	12,280,500.00	
esek kakalung terdak	ep de la tribos antidicio est variables (200		de la la desta de la			inima and
	e of net outlays, consisting of: (in-kind) contributions					0.00
	eral awards authorized to be used	to match this award			†	0.00
g. Program in	scome used in accordance with th	e matching or cost				
sharing alternative						0.00
h. All other recipient outlays not shown on lines e, f or g						0.00
i. Total recipi	ent share of net outlays (Sum of li	ines e, f, g and h)	0.00	0.00	,	0.00
j. Federal sha	are of net outlays (line d less line	i)	0.00	12,280,500.00	12,280,5	00.00
k. Total unliquidated obligations			rianas vestraarentii vesti (19			
l. Recipient's	share of unliquidated obligations					
m. Federal share of unliquidated obligations						
n. Total Federal share (sum of lines j and m)					12,280,500.00	
o. Total Federal funds authorized for this funding period					33,805,617.00	
p. Unobligated balance of Federal funds (Line o minus line n)					21,525,1	 17.00
Program income	consisting of:	egeneratura (tag) etgenera (janea)				a iskuisk
Program Income, consisting of:  q. Disbursed program income shown on lines c and/or g above						
r. Disbursed	program income using the additio	n alternative				
s. Undisburse	ed program income		CONTRACTOR OF THE	INCOME ALCOHOMOS CONTRACT		<del></del>
t. Total program income realized (Sum of lines q, r and s)						
	a. Type of Rate (Place "X" in	appropriate how)	an estimate est est est est		<u></u>	0.00
11. Indirect	a. Type of Rate   Place X III		ermined	☐ Final	Fixed	
Expense	b. Rate In Development	c. Base In Development	d, Total Amount	e, F	Federal Share	
12. Remarks: At	tach any explanations deemed n	· · · · · · · · · · · · · · · · · · ·	 red by Federal sponsorin	ng agency in compliance	with	
governing leg			•	· ·		
Indirect cost r	ate plan in development fo	or this program.				
13. Certification:	I certify to the best of my kno	wledge and belief that this re	port is correct and cor	mplete and that all outla	ays and	
	unliquidated obligations are fo					
Typed or Printed No Michael W. Ro	ame and Title pate, Chief Piscal Officer	•	•	Telephone (Area code, number and extension) (217) 782-1525		
Signature of Author	rized Certifying Official			Date Report Submitted		,
- /VI.	101 A ment		January 20, 2007			